



SOUTH SACRAMENTO

KAISER FOUNDATION HOSPITAL NORTHERN CALIFORNIA REGION



2020 COMMUNITY BENEFIT YEAR-END REPORT AND 2020-2022 COMMUNITY BENEFIT PLAN

Community

Submitted to the Office of Statewide Health Planning and Development in compliance with Senate Bill 697, California Health and Safety Code Section 127350.



KAISER PERMANENTE®

in the community

Kaiser Foundation Hospital (KFH)-South Sacramento

Table of Contents

I. Introduction and Background

- a. About Kaiser Permanente
- b. About Kaiser Permanente Community Health
- c. Purpose of the Report

II. Overview of Community Benefit Programs Provided

- a. California Kaiser Foundation Hospitals Community Benefit Financial Contribution - Tables A and B
- b. Medical Care Services for Vulnerable Populations
- c. Other Benefits for Vulnerable Populations
- d. Benefits for the Broader Community
- e. Health Research, Education, and Training Programs

III. KFH-South Sacramento Community Served

- a. Kaiser Permanente's Definition of Community Served
- b. Map and Description of Community Served
- c. Demographic Profile of Community Served

IV. KFH-South Sacramento Community Health Needs in 2020-2022

- a. Health Needs Addressed
- b. Health Needs Not Addressed

V. 2020 Year-End Results for KFH-South Sacramento

- a. 2020 Community Benefit Programs Financial Resources Provided by KFH-South Sacramento - Table C
- b. 2020 Examples of KFH-South Sacramento Grants and Programs Addressing Selected Health Needs

I. Introduction and Background

A. About Kaiser Permanente

Founded in 1942 to serve employees of Kaiser Industries and opened to the public in 1945, Kaiser Permanente is recognized as one of America's leading health care providers and nonprofit health plans. We were created to meet the challenge of providing American workers with medical care during the Great Depression and World War II, when most people could not afford to go to a doctor. Since our beginnings, we have been committed to helping shape the future of health care. Among the innovations Kaiser Permanente has brought to U.S. health care are:

- Prepaid health plans, which spread the cost to make it more affordable
- A focus on preventing illness and disease as much as on caring for the sick
- An organized, coordinated system that puts as many services as possible under one roof—all connected by an electronic medical record

Kaiser Permanente is an integrated health care delivery system comprised of Kaiser Foundation Hospitals (KFH), Kaiser Foundation Health Plan (KFHP), and physicians in the Permanente Medical Groups. Today we serve approximately 12.2 million members in nine states and the District of Columbia. Our mission is to provide high-quality, affordable health care services and to improve the health of our members and the communities we serve.

Care for our members and patients is focused on their Total Health and guided by their personal physicians, specialists, and team of caregivers. Our expert and caring medical teams are empowered and supported by industry-leading technology advances and tools for health promotion, disease prevention, state-of-the-art care delivery, and world-class chronic disease management. Kaiser Permanente is dedicated to care innovations, clinical research, health education, and the support of community health.

B. About Kaiser Permanente Community Health

For 75 years, Kaiser Permanente has been dedicated to providing high-quality, affordable health care services and to improving the health of our members and the communities we serve. We believe good health is a fundamental right shared by all and we recognize that good health extends beyond the doctor's office and the hospital. It begins with healthy environments: fresh fruits and vegetables in neighborhood stores, successful schools, clean air, accessible parks, and safe playgrounds. Good health for the entire community requires equity and social and economic well-being. These are the vital signs of healthy communities.

Better health outcomes begin where health starts, in our communities. Like our approach to medicine, our work in the community takes a prevention-focused, evidence-based approach. We go beyond traditional corporate philanthropy or grantmaking to pair financial resources with medical research, physician expertise, and clinical practices. Our community health strategy focuses on three areas:

- Ensuring health access by providing individuals served at Kaiser Permanente or by our safety net partners with integrated clinical and social services.
- Improving conditions for health and equity by engaging members, communities, and Kaiser Permanente’s workforce and assets.
- Advancing the future of community health by innovating with technology and social solutions.

For many years, we’ve worked side-by-side with other organizations to address serious public health issues such as obesity, access to care, and violence. We’ve conducted Community Health Needs Assessments to better understand each community’s unique needs and resources. The CHNA process informs our community investments and helps us develop strategies aimed at making long-term, sustainable change—and it allows us to deepen the strong relationships we have with other organizations that are working to improve community health.

C. Purpose of the Report

Since 1996, Kaiser Foundation Hospitals (KFH) in Northern and Southern California have annually submitted to the Office of Statewide Health Planning and Development (OSHPD) a Consolidated Community Benefit Plan, commonly referred to as the SB 697 Report (for Senate Bill 697 which mandated its existence). This plan fulfills the 2020 year-end community benefit reporting regulations under California Health and Safety Code, Section 127340 et seq. The report provides detailed information and financial data on the Community Benefit programs, services, and activities provided by all KFH hospitals in California.

II. Overview and Description of Community Benefit Programs Provided

A. California Kaiser Foundation Hospitals Community Benefit Financial Contribution

In California, KFH owns and operates 36 hospitals: 21 community hospitals in Northern California and 15 in Southern California, all accredited by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO). KFH hospitals are located in Anaheim, Antioch, Baldwin Park, Downey, Fontana, Fremont, Fresno, Irvine, Los Angeles, Manteca, Modesto, Moreno Valley, Oakland, Ontario, Panorama City, Redwood City, Richmond, Riverside, Roseville, Sacramento, San Diego, San Francisco, San Jose, San Leandro, San Rafael, Santa Clara, Santa Rosa, South Bay, South Sacramento, South San Francisco, Vacaville, Vallejo, Walnut Creek, West Los Angeles, and Woodland Hills.

In 2020, Kaiser Foundation Hospitals in Northern and Southern California Regions provided a total of \$1,294,404,117 in Community Benefit for a diverse range of community projects, medical care services, research, and training for health and medical professionals. These programs and services are organized in alignment with SB697 regulations:

- Medical Care Services for Vulnerable Populations
- Other Benefits for Vulnerable Populations
- Benefits for the Broader Community
- Health, Research, Education and Training

A breakdown of financial contributions is provided in Tables A and B. Note that 'non-quantifiable benefits' will be highlighted in the Year end Results section of KFH Community Benefit Plan, where applicable.

Table A

KAISER FOUNDATION HOSPITALS IN CALIFORNIA

Community Benefits Provided in 2020 (Endnotes on following page.)

Medical Care Services for Vulnerable Populations	
Medi-Cal shortfall ¹	\$692,686,921
Charity care: Charitable Health Coverage Programs ²	\$94,951
Charity care: Medical Financial Assistance Program ³	\$292,212,296
Grants and donations for medical services ⁴	\$32,762,341
Subtotal	\$1,017,756,509
Other Benefits for Vulnerable Populations	
Watts Counseling and Learning Center ⁵	\$3,159,122
Educational Outreach Program	\$996,423
Youth Employment programs ⁶	\$692,228
Grants and donations for community-based programs ⁷	\$85,399,347
Community Benefit administration and operations ⁸	\$12,241,501
Subtotal	\$102,488,621
Benefits for the Broader Community⁹	
Community health education and promotion programs	\$1,091,019
Kaiser Permanente Educational Theatre	\$5,784,348
Facility, supplies, and equipment (in-kind)	\$3,609,800
Community Giving Campaign administrative expenses	\$681,817
Grants and donations for the broader community ¹⁰	\$6,607,309
National Board of Directors fund	\$742,769
Subtotal	\$18,517,062
Health Research, Education, and Training	
Graduate Medical Education	\$98,995,981
Non-MD provider education and training programs ¹¹	\$27,487,338
Grants and donations for the education of health care professionals ¹²	\$2,315,284
Health research	\$26,843,322
Subtotal	\$155,641,925
TOTAL COMMUNITY BENEFITS PROVIDED	\$1,294,404,117

TABLE A ENDNOTES

- ¹ Amount includes hospital-specific, unreimbursed expenditures for Medi-Cal Managed Care members and Medi-Cal Fee-for-Service beneficiaries on a cost basis.
- ² Amount includes hospital-specific, unreimbursed expenditures for Other Plan members and unreimbursed inpatient expenditures for Charitable Health Coverage on a cost basis.
- ³ Amount includes unreimbursed care provided at this facility to patients who qualify for the Medical Financial Assistance on a cost basis.
- ⁴ Figures reported in this section for grants and donations for medical services consist of charitable contributions to community clinics and other safety-net providers; community health partnerships and collaboratives; and special Request for Proposals to support specific health issues such as childhood obesity, asthma, etc. The amount reported reflects hospital-specific, unreimbursed expenditures. When hospital-specific expenditures were not available, dollars were allocated to each hospital based on the percentage of Health Plan members.
- ⁵ Watts Counseling and Learning Center's service expenses are divided among three hospitals: KFH-Downey, KFH-South Bay, and KFH-West Los Angeles.
- ⁶ Figures reported in this section are hospital-specific, unreimbursed expenditures. When hospital-specific expenditures were not available, dollars were allocated to each hospital based on the number of Youth Employment Programs participants hired.
- ⁷ Figures reported in this section for grants and donations for community-based programs consist of charitable contributions made to external nonprofit organizations for a variety of programs and services that address the nonmedical needs of vulnerable populations. The amount reflects hospital-specific, unreimbursed expenditures. When hospital-specific expenditures were not available, dollars were allocated to each hospital based on the percentage of Health Plan members.
- ⁸ The amount reflects the costs related to providing a dedicated community benefit department and related operational expenses.
- ⁹ Figures reported in this section are hospital-specific, unreimbursed expenditures. When hospital-specific expenditures were not available, dollars were allocated to each hospital based on the percentage of Health Plan members, or several related denominators such as the number of Educational Theatre performances or Health Education programs.
- ¹⁰ Figures reported in this section for grants and donations for the broader community consist of charitable contributions made to external nonprofit organizations to educate health care consumers in managing their own health and making informed decisions when obtaining services; and to develop, produce, or communicate health care-related public policy information for a variety of programs and services aimed at general well-being of the community. The amount reflects hospital-specific, unreimbursed expenditures. When hospital-specific expenditures were not available, dollars were allocated to each hospital based on the percentage of Health Plan members.
- ¹¹ Amount reflects the net expenditures after scholarships for health professional education and training programs.

¹² Figures reported in this section for grants and donations for the education of health care professionals consist of charitable contributions made to external nonprofit organizations, colleges, and universities to support the training and education of students seeking to become health care professionals such as physicians, nurses, physical therapists, social workers, pharmacists, etc. The amount reflects hospital-specific, unreimbursed expenditures. When hospital-specific expenditures were not available, dollars were allocated to each hospital based on the percentage of Health Plan members.

Table B
KAISER FOUNDATION HOSPITALS IN CALIFORNIA
Community Benefits Provided by Hospital Service Area in 2020

NORTHERN CALIFORNIA HOSPITALS		SOUTHERN CALIFORNIA HOSPITALS	
Antioch	\$32,884,734	Anaheim	\$38,125,925
Fremont	\$11,870,189	Baldwin Park	\$31,073,319
Fresno	\$17,121,944	Downey	\$46,435,644
Manteca	\$30,479,883	Fontana	\$70,060,474
Modesto	\$16,601,850	Irvine	\$16,259,901
Oakland	\$68,247,808	Los Angeles	\$61,151,477
Redwood City	\$17,113,356	Moreno Valley	\$13,907,228
Richmond	\$45,313,562	Ontario	\$19,946,787
Roseville	\$46,614,984	Panorama City	\$39,931,373
Sacramento	\$87,732,815	Riverside	\$36,807,300
San Francisco	\$37,776,000	San Diego	\$60,564,848
San Jose	\$29,971,995	South Bay	\$34,209,359
San Leandro	\$40,190,288	West Los Angeles	\$41,447,010
San Rafael	\$18,618,231	Woodland Hills	\$24,655,944
Santa Clara	\$43,328,256		
Santa Rosa	\$34,940,812		
South Sacramento	\$71,905,940		
South San Francisco	\$14,140,089		
Vacaville	\$26,348,833		
Vallejo	\$44,781,858		
Walnut Creek	\$23,844,101		
Northern California Total	\$759,827,528	Southern California Total	\$534,576,588

B. Medical Care Services for Vulnerable Populations

For the purpose of this plan, KFH has quantified the unreimbursed costs of medical services provided in its hospitals to the underinsured and uninsured through government programs funded at the federal and state levels as well as Kaiser Permanente's own charity care programs. Government-funded programs include Medi-Cal Managed Care, Medi-Cal Fee-For-Service, and Healthy Families Program. KFH provides charity care through its Charitable Health Coverage and Medical Financial Assistance programs. Services provided to prepaid Medicare, Major Risk Medical Insurance Program (MRMIP), and Access for Infants and Mothers (AIM) beneficiaries are not reported.

C. Other Benefits for Vulnerable Populations

Watts Counseling and Learning Center (SCAL)

Since 1967, the Watts Counseling and Learning Center (WCLC) has been a valuable community resource for low-income, inner-city families in South Central Los Angeles. WCLC provides mental health and counseling services, educational assistance to children with learning disabilities, and a state-licensed and nationally accredited preschool program. Kaiser Permanente Health Plan membership is not required to receive these services and all services are offered in both English and Spanish. This program primarily serves the KFH-Downey, KFH-South Bay and KFH-West LA communities.

Educational Outreach Program (SCAL)

Since 1992, Educational Outreach Program (EOP) has been empowering children and their families through several year-round educational, counseling, and social programs. EOP helps individuals develop crucial life-skills to pursue higher education, live a healthier lifestyle through physical activity and proper nutrition, overcome mental obstacles by participating in counseling, and instill confidence to advocate for the community. EOP primarily serves the KFH-Baldwin Park community.

Youth Employment Programs (NCAL and SCAL)

Youth workforce programs focus on providing underserved diverse students with meaningful employment experiences in the health care field. Educational sessions and motivational workshops introduce them to the possibility of pursuing a career in health care while enhancing job skills and work performance. These programs serve as a pipeline for the organization and community-at-large, enhancing the future diversity of the health care workforce.

D. Benefits for the Broader Community

Community Health Education and Health Promotion Programs (NCAL and SCAL)

Health Education provides evidence-based clinically effective programs, printed materials, and training sessions to empower participants to build healthier lifestyles. This program incorporates tested models of behavior change, individual/group engagement and motivational interviewing as a language to elicit behavior change. Many of the programs and resources are offered in partnership with community groups, community clinics, libraries, nonprofit organizations, cable television channels, and schools.

Kaiser Permanente Educational Theatre (NCAL and SCAL)

Since 1986, KPET has been using live theatre, music, comedy, and drama to inspire children, teens, and adults to make healthier choices and better decisions about their well-being. Its award-winning programs are as entertaining as they are educational and were developed with the advice of teachers, parents, students, health educators, medical professionals, and professional theatre artists. Professional actors who are also trained health educators deliver all performances and workshops. KPET programs share health information and develop individual and community knowledge about leading healthier lives. KPET is provided free of charge to schools and the general community. In addition to performances and classroom workshops, KPET supplies schools and organizations with supplementary educational materials - including workbooks, parent and teacher guides, and student wallet cards - to reinforce the messages presented in the programs.

E. Health Research, Education, and Training Programs

Graduate Medical Education (GME)

The mission of Kaiser Permanente GME is to recruit and prepare the physician workforce of the 21st century by optimizing the unique clinical and educational opportunities within our integrated model of care, which is now considered the gold standard for improving the entire U.S. health care system. Residents trained in our health care settings utilize technology to provide evidence-based, patient-centered care in a team-based model, employ population management strategies, and cultivate their skills in cultural sensitivity, effective communication, and leadership. As part of their training, residents participate in rotations at school-based health centers, community clinics, and homeless shelters.

Non-MD Provider Education and Training Programs

Kaiser Permanente provides education, training, residences, internships, and/or scholarships and stipends for non-physician health care professionals in nursing, pharmacy, physical therapy, psychology, and radiology. This includes Northern California Region's Kaiser Permanente School of Allied Health Sciences, which offers 18-month training programs in sonography, nuclear medicine,

and radiation therapy and Southern California Region's Hippocrates Circle Program, which was designed to provide youth from under-represented communities and diverse backgrounds with an awareness of career opportunities as a physician.

Health Research

Kaiser Permanente conducts, publishes, and disseminates high-quality epidemiological and health services research to improve health and medical care throughout our communities. Our Division of Research (NCAL), Department of Research and Evaluation (SCAL), Kaiser Foundation Research Institute, and Nursing Research Programs deploy a wide range of research methods, including clinical research, health care services research, and epidemiological and translational studies on health care that are generalizable and broadly shared, helping build a knowledge base that improves health and health care services.

III. KFH-South Sacramento Community Served

F. Kaiser Permanente’s Definition of Community Served

Kaiser Permanente defines the community served by a hospital as those individuals residing within its hospital service area. A hospital service area includes all residents in a defined geographic area surrounding the hospital and does not exclude low-income or underserved populations.

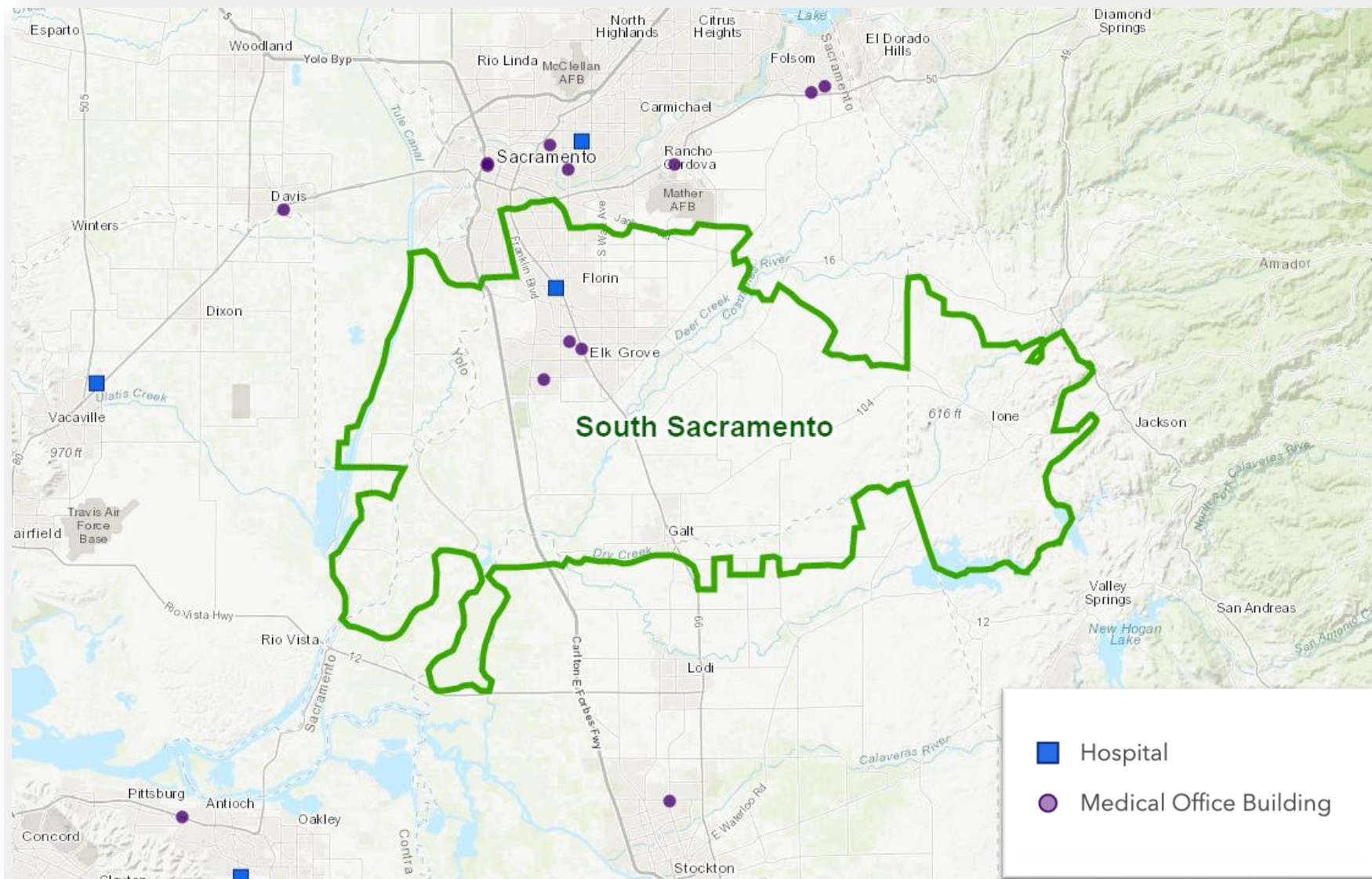
G. Demographic Profile of Community Served by KFH-South Sacramento

Total Population	474,613
White	45.3%
Black/African American	12.5%
Asian	23.9%
Native American/ Alaskan Native	0.8%
Pacific Islander/ Native Hawaiian	1.7%
Some Other Race	8.0%

Multiple Races	7.7%
Hispanic/Latino	26.9%
Total Living in Poverty (<100% FPL)	19.2%
Children Living in Poverty	26.6%
Unemployment Rate	3.8%
Uninsured Population	10.7%
Adults with No High School Diploma	18.8%

SOURCE: AMERICAN COMMUNITY SURVEY, 2012-2016

H. Map and Description of Community Served by KFH-South Sacramento



The KFH-South Sacramento service area comprises a large part of Sacramento County, including the cities of Sacramento, Elk Grove, and Galt, and a portion of Amador County.

IV. Description of Community Health Needs Addressed by KFH-South Sacramento

The following are the health needs KFH-South Sacramento is addressing during the 2020-2022 Implementation Strategy Period. For information about the process and criteria used to select these health needs and the health needs that were not selected (and the rationale), review the 2019 Community Health Needs Assessment (CHNA) Report and the 2020-2022 Implementation Strategy Report at: <http://www.kp.org/chna>.

A. Health Needs Addressed

1. Community and Family Safety

This health need was referred to as Violence and Injury Prevention in the 2019 KFH-South Sacramento CHNA report. It includes, direct and indirect exposure to violence and injury, such as domestic and community violence, which have significant effects on well-being and health. The CHIC prioritized this health need as it emerged as a top health need within the quantitative and qualitative data in the 2019 CHNA report. Violence experienced by women and children emerged as a specific concern. As a result, Community and Family Safety aims to support women and children as a target population. The CHNA process also identified the need for safe and violence-free spaces was identified as an emerging need by the community. The CHIC discussed the communities' insight and acknowledged the importance of increasing access to safe spaces to help improve community and individual wellbeing.

2. Economic Security

Economic security means having the financial resources, public supports, career and educational opportunities, and housing accommodations necessary to live one's fullest life. This is the first year that Economic Security was identified as a priority health need for the KFH-South Sacramento service area. This health need was prioritized by the CHIC given the large disparities and inequity in the community around economic security and recognition that these disparities continue to grow. For example, increasing numbers of homeless individuals and the lack of job pathways for marginalized communities (e.g., youth, formerly incarcerated) were highlighted in the CHNA qualitative and quantitative data. The CHIC identified opportunities for KFH-South Sacramento to engage in efforts to improve economic security in the community, including increasing purchasing from local businesses. The Committee also discussed the importance of a collaborative approach to addressing this health need and partnering with other stakeholders to address this need.

3. Access to Care

This health need includes access to quality health care, such as affordable health insurance and utilization of preventive care, with the goal of reducing the risk of unnecessary disability and premature death. In addition, this health need includes increasing health literacy and community awareness of health care resources. The CHIC prioritized this health need as a result of identifying access to care at the core of Kaiser Permanente's work and the opportunity to leverage organizational assets to address this need in the community. Committee members discussed the importance of creating a more culturally competent workforce and in diversifying staffing. To achieve this, they identified opportunities to train and employ more local community members in health care services.

4. Mental and Behavioral Health

Mental and behavioral health are foundations for healthy living, and encompass rates of mental illness, challenging behaviors (e.g., school suspensions), substance abuse, access to social and emotional support, and access to providers for preventive care and treatment. Given the 2019 CHNA data and the recognition that mental and behavioral health are often associated with other health needs, the CHIC identified mental and behavioral health as a priority health need. Community members engaged in the CHNA process also identified mental and behavioral health as a priority. As noted in the CHNA data, there is insufficient capacity within the community to address the needs. The CHIC discussed the importance of KFHS-South Sacramento's role in addressing this health need.

B. Health Needs Not Addressed

Several of the health needs prioritized in the 2019 KFHS-South Sacramento CHNA report will not be addressed with the 2020-2022 implementation strategies: Environmental Health, Healthy Eating and Active Living (HEAL), and Women and Children's Well-being. South Sacramento CHIC members ranked these lowest among the health needs as part of the Implementation Strategies prioritization process. However, although not selected as priority health needs, goals and strategies in health needs that were selected reflect core components of Healthy Eating and Active Living and Women and Children's Well-being. For example, KFHS-South Sacramento and the CHIC members decided that there was ample evidence in the 2019 CHNA data to indicate that women and children should be a focal population within each of the prioritized health needs. Similarly, strategies to address core components of Healthy Eating and Active Living were integrated into other health needs, including access to CalFresh into Economic Security, and increasing access to healthy lifestyle resources into Access to Care. Environmental Health did not rise to the top in the CHIS prioritization process as the CHIC members felt there were fewer organizational assets that could be leveraged to make an impact in this domain. From

as strategic point of view, the CHIC members wanted to ensure organization assets were used in ways that would be most beneficial to the community.

V. 2020 Year-End Results for KFH-South Sacramento

A. 2020 Community Benefit Financial Resources Provided by KFH-South Sacramento

Total Community Benefit expenditures are reported as follows:

- Quantifiable Community Benefit such as facility use and in-kind donations are included if funded by KFH, provided in a KFH facility, or are part of a KFH Community Benefit Plan.
- Medical care services for vulnerable populations include unreimbursed inpatient costs for participation in Kaiser Permanente-subsidized and government-sponsored health care insurance programs.
- The unreimbursed portion of medical, nursing, and other health care professional education and training costs are included.

Resource allocations are reported, as follows:

- Financial expenditures are reported in exact amounts, if available, by hospital service area.
- If exact financial expenditure amounts were not available by hospital service area, then regional expenses were allocated proportionally based on KFHP membership or other quantifiable data, such as the number of Kaiser Permanente Youth Employment participants employed within each hospital area's community at large.

Table C

KFH-South Sacramento

Community Benefits Provided in 2020 (Endnotes on following page.)

Medical Care Services for Vulnerable Populations	
Medi-Cal shortfall ¹	\$51,339,961
Charity care: Medical Financial Assistance Program ²	11,150,059
Grants and donations for medical services ³	249,339
Subtotal	\$62,739,359
Other Benefits for Vulnerable Populations	
Summer Youth and Inroads programs ⁴	\$65,472
Grants and donations for community-based programs ⁵	4,222,149
Community Benefit administration and operations ⁶	364,371
Subtotal	\$4,651,992
Benefits for the Broader Community⁷	
Community health education and promotion programs	\$138
Community Giving Campaign administrative expenses	32,573
Grants and donations for the broader community ⁸	479,776
National Board of Directors fund	22,361
Subtotal	\$534,847
Health Research, Education, and Training	
Graduate Medical Education	\$2,212,890
Non-MD provider education and training programs ⁹	1,020,417
Grants and donations for the education of health care professionals ¹⁰	11,667
Health research	734,769
Subtotal	\$3,979,742
Total Community Benefits Provided	\$71,905,940

TABLE C ENDNOTES

1. Amount includes hospital-specific, unreimbursed expenditures for Medi-Cal Managed Care members and Medi-Cal Fee-for-Service beneficiaries on a cost basis.
2. Amount includes unreimbursed care provided at this facility to patients who qualify for the Medical Financial Assistance on a cost basis.
3. Figures reported in this section for grants and donations for medical services consist of charitable contributions to community clinics and other safety-net providers; community health partnerships and collaboratives; and special Request for Proposals to support specific health issues such as childhood obesity, asthma, etc. The amount reported reflects hospital-specific, unreimbursed expenditures. When hospital-specific expenditures were not available, dollars were allocated to each hospital based on the percentage of Health Plan members.
4. Figures reported in this section are hospital-specific, unreimbursed expenditures. When hospital-specific expenditures were not available, dollars were allocated to each hospital based on the number of Youth Employment programs participants hired.
5. Figures reported in this section for grants and donations for community-based programs consist of charitable contributions made to external nonprofit organizations for a variety of programs and services that address the nonmedical needs of vulnerable populations. The amount reflects hospital-specific, unreimbursed expenditures. When hospital-specific expenditures were not available, dollars were allocated to each hospital based on the percentage of Health Plan members.
6. The amount reflects the costs related to providing a dedicated community benefit department and related operational expenses.
7. Figures reported in this section are hospital-specific, unreimbursed expenditures. When hospital-specific expenditures were not available, dollars were allocated to each hospital based on related denominators such as the number of health education programs.
8. Figures reported in this section for grants and donations for the broader community consist of charitable contributions made to external nonprofit organizations to educate health care consumers in managing their own health and making informed decisions when obtaining services; and to develop, produce, or communicate health care-related public policy information for a variety of programs and services aimed at general well-being of the community. The amount reflects hospital-specific, unreimbursed expenditures. When hospital-specific expenditures were not available, dollars were allocated to each hospital based on the percentage of Health Plan members.
9. Amount reflects the net expenditures for health professional education and training programs.
10. Figures reported in this section for grants and donations for the education of health care professionals consist of charitable contributions made to external nonprofit organizations, colleges, and universities to support the training and education of students seeking to become health care professionals. The amount reflects hospital-specific, unreimbursed expenditures. When hospital-specific expenditures were not available, dollars were allocated to each hospital based on the percentage of Health Plan members.

B. Examples of KFH-South Sacramento’s 2020 Activities to Address Selected Health Needs

All Kaiser Foundation Hospitals (KFH) carefully consider the evidence-base when determining which goals, strategies, and related activities would be most effective in addressing priority health needs. It is anticipated that successful implementation of key activities (programs, grants, collaboration, and/or in-kind assets), tied to key goals and strategies, can contribute toward improving the priority health needs in the community. For information on the goals and strategies that were selected for each health need, please refer to the KFH-South Sacramento Community Benefit Plan/Implementation Strategy Report posted on the internet at <http://www.kp.org/chna>.

Mechanisms for monitoring progress are tailored to each activity and may include the collection and documentation of tracking measures such as number of grants made, number of dollars spent, number of people reached/served, and number and role of Kaiser Permanente volunteers. Kaiser Permanente also conducts evaluation of larger grant initiatives to understand both progress and outcomes. In addition to internal monitoring and evaluation, Kaiser Permanente requires grantees to propose, track, and report outcomes of the projects for which they have received funding.

The below tables provide highlights for a select number of programs, grants, collaboration and/or assets that aims to address the identified health needs for KFH-South Sacramento. The examples provided below are illustrations and not an exhaustive list. Where appropriate, summative information is provided for programs that have been implemented in multiple years.

The total number and amount of paid grants to address a health need include those that are awarded to organizations providing programs serving the KFH-South Sacramento service area and may also serve other KFH service areas. Grant examples denoted with (~) provide services and/or programs in multiple KFH service areas. Grant examples denoted with (*) were distributed from Kaiser Permanente Northern California Community Benefit’s donor advised fund (DAF), which is administered by the East Bay Community Foundation; accordingly, DAF grant amounts were not included in the community benefit totals for 2020 (Tables B and C).

In addition to the highlights in the below tables that address specific health needs, Kaiser Permanente Northern California Community Benefit implements additional community programs that address multiple health needs, including:

Need	Summary of Impact	Examples of most impactful efforts
	In 2020, there were 10 grants totaling \$281,833.00 that	A \$150,000 grant~ to WellSpace Health, Inc. (impacting KFH-Sacramento and KFH-South Sacramento) will support its Sacramento Violence Intervention

Need	Summary of Impact	Examples of most impactful efforts
<p>Community and Family Safety</p>	<p>addressed Community and Family Safety in the KFH-South Sacramento service area.</p>	<p>Program (SVIP) project, which started in June 2010. SVIP’s primary goal is to reduce reinjury and retaliation among patients who are admitted to Kaiser Permanente (or partnering health systems) due to a violent crime as well as implementing violence prevention strategies in the community. Designed to decrease the risk of additional trauma, SVIP provides intensive case management and service linkages to patients and educates the community about trauma-informed practices to support the healing of the youth and community. Violence is a public health issue and SVIP uses evidence-based strategies to reduce the impact of violence and increase the resiliency of the youth involved. This grant will allow SVIP to respond to a recent increase in violence in Sacramento since the shelter-in-place order was put in effect and an increase in racial unrest related to recent police killings.</p> <p>City of Refuge Sacramento received a \$25,000 grant for Refuge Housing for Women and Children, located in the Oak Park neighborhood. The average age of shelter clients is 18 to 26 and 85% are mothers. Referrals come from local law enforcement, community agencies, the prison system, and the agency's neighborhood resource center. This grant will help City of Refuge Sacramento provide 3- to 6-month emergency shelter and a yearlong 3-phase transitional housing program for survivors of violence, sexual harm, exploitation, and human trafficking. To support this effort, City of Refuge Sacramento has memorandums of understanding with several local organizations, including Dignity Health whose Mobile Trauma Clinic provides up to 25 hours of therapeutic services a week for Refuge Housing residents.</p> <p>Community Against Sexual Harm (CASH) received a \$25,000 grant for its Safe Women program, which provides education and peer support to women who have been commercially sexually exploited in Sacramento County. Classes will be in Oak Park for women participating in the RESET (Reducing Sexual Exploitation and Trafficking) prostitution diversion program and those receiving substance abuse treatment. Most clients have never engaged with</p>

Need	Summary of Impact	Examples of most impactful efforts
		<p>advocates regarding the violence in their life and have not received services to address the impact this violence has had on their safety and well-being. The program helps women create safe environments and a system of support within their community. Approximately 80% of participants have experienced criminal justice involvement, which further undermines their resiliency; about 50% are African American; roughly 65% are under the age of 30; and more than 70% have been physically or sexually assaulted.</p> <hr/> <p>Sacramento Children’s Home (SCH) received a \$25,000 grant~ (split between KFH-Roseville, KFH-Sacramento, and KFH-South Sacramento) to support its Crisis Nursery Program, a unique and integral family strengthening program that helps SCH achieve its mission by providing parents of children age 0 to 5 a safe place to bring their children during times of extreme stress or crisis. Most parents who seek Crisis Nursery Program support are young, single parents; grandparents raising grandchildren; or foster parents. Because they often lack a reliable family or community support system, these parents have nowhere else to turn during times of extreme crisis. Upon leaving the Crisis Nursery, 92% of caregivers report that they are “better able to handle challenging parenting situations” and 91% report an increased knowledge of available community resources to assist them in the future. The goal is to keep at-risk families together and reduce the number of young children who enter the foster care system.</p> <hr/> <p>Relmagine Mack Road Foundation, which works to find new ways to reach and create a positive, lasting impact on the community it serves, received a \$50,000 grant for its Relmagine Community C.A.R.E. (Connect, Activate, Revitalize, Empower) 2021 program. The program was designed to improve community and family safety for at-risk, low-income, children/youth-of-color and their families living in the Valley-Mack neighborhood of South Sacramento who are served at the Mack Road Valley Hi Community Center and has evolved to include targeted assistance to youth and families</p>

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		<p>adversely impacted by the COVID-19 pandemic. During COVID-19, Mack Road pivoted to provide food for local families and to ensure children had access to wi-fi hot spots to complete their distance learning assignments. It also serves as a safe and trusted presence in the community.</p>
<p>Economic Security</p>	<p>In 2020, there were 17 grants totaling \$285,333.00 that addressed Economic Security in the KFH-South Sacramento service area.</p>	<p>A \$125,000 grant~ (impacting KFH-Roseville, KFH-Sacramento, and KFH-South Sacramento) to Healthy Community Forum for the Greater Sacramento Region (dba Sacramento Covered) will allow the agency to provide housing support for homeless non-member high-utilizers of Kaiser Permanente KFH-Sacramento and KFH-South Sacramento emergency departments, which have some of the highest numbers of homeless non-members who regularly access Kaiser Permanente emergency services in Northern California Region.</p> <p>Hacker Labs received a \$35,000 grant for its MAKEHER: Small Business Incubator for Women Entrepreneurs. Hacker Lab CEO Gina Lujan (2019 ICCO cohort graduate, hackerlab.org) will build on the agency's existing Pathways program to support 4 cohorts of 15 women from low-income and underrepresented communities through MAKEHER's 90-day business incubator program. Hacker Lab currently has more than 700 active members, more than \$500,000 worth of equipment, 100 classes and events per month, and 15,000 sq ft of workspace. The 90-day incubator will provide entrepreneurial education such as lean business methodology, design thinking, marketing, and user experience; financial literacy and credit repair; and mentorship from a broad swath of businesswomen, including Kaiser Permanente leadership. Ms. Lujan will also pull content from ICCO that is relevant to entrepreneurs in the early stages of business development. Participants who can demonstrate a viable business model will receive \$1,000 in start-up funding, upon program graduation.</p> <p>Boys & Girls Club of Greater Sacramento received a \$25,000 grant~ (split between KFH-Sacramento and KFH-South Sacramento) to support Keeping Teens Connected: JJET/Career Launch/Club Connect 2020-2021, which was</p>

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		<p>designed to help formerly incarcerated youth prepare for the workforce and future earning potential. Program participants will develop soft skills such as perseverance, communication, and problem-solving and hard skills in the areas of digital literacy, STEM, and financial literacy that are transferable across all industry sectors. Kaiser Permanente funding will help support 250 youth complete the Career Launch workforce development program and 25 Career Launch graduates will be receive paid internships. A minimum of 200 youth incarcerated at Sacramento Youth Detention Facility will successfully complete the financial literacy curriculum (Money Matters).</p> <hr/> <p>Sacramento Steps Forward (SSF) received a \$50,000 grant~ (split between KFH-Roseville, KFH-Sacramento, and KFH-South Sacramento) to support Sacramento County’s Built for Zero (BfZ) effort by funding a new policy and communications coordinator position. This will fill a significant gap in SSF’s current capacity as BfZ - which addresses issues such as veteran and chronic homeless - develops and accelerates. SSF, lead coordinating agency for Sacramento County’s Continuum of Care (COC), is also co-lead of the BfZ partnership with Community Solutions. SSF’s increased capacity around policy and communications will help promote the data improvement work underway with the BfZ team to inform decision makers, create greater alignment among city and county policies and funding streams, and improve coordination among homeless-serving stakeholders to drive toward the common goal of population-level reductions.</p> <hr/> <p>Los Rios College Foundation received a \$25,000 grant for its Community Health Worker (CHW) program. Kaiser Permanente funding will help the Los Rios Community College District expand its existing CHW program, co-located at the Urban League in North Sacramento, to a broader base of students from the Latinx community by hosting classes at La Familia Counseling Center (LFCC). By the end of the program, up to 47 members of the community served by LFCC will have attended the program, with at least</p>

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		<p>70% successfully completing the Los Rios College Foundation certificate program. At least 30% of graduates will be employed as CHWs within three months of finishing.</p>
<p>Access to Care</p>	<p>In 2020, there were 21 grants totaling \$246,910.66 that addressed Access to Care in the KFH-South Sacramento service area.</p>	<p>Kaiser Permanente Medicaid and Charity Care: In 2020, Kaiser Permanente provided care to 30,967 Medi-Cal members and 85 Charitable Health Coverage (CHC) members in the KFH-South Sacramento service area. And another 8,493 individuals received Medical Financial Assistance (MFA).</p> <p>A \$375,000 grant~ Central Valley Health Network (CVHN) (impacting KFH-Fresno, KFH-Manteca, KFH-Modesto, KFH-Roseville, KFH-Sacramento, KFH-South Sacramento, and KFH-Vacaville) will support funding for regional, statewide, and federal policy/advocacy issues and activities that affect the federally qualified health centers in the CVHN service area for the purpose of increasing access to care; and supporting the development and retention of a strong health center workforce in the regions served by CVHN members. CVHN will use its COVID-19 funding for virtual convenings on COVID for member clinics, and for purchase of PPE and equipment for remote monitoring, infection control and responsive requests funding from their member clinics.</p> <p>A \$50,000 grant~ to Community Link Capital Region (impacting KFH-Roseville, KFH-Sacramento, and KFH-South Sacramento) will support core operations and services for this local 211 organization. 211 systems are a crucial resource in emergencies, such as the wildfires that have ravaged California in recent years. 211 systems facilitate the quick dissemination of information regarding evacuations, shelters, and aid, all while reducing 911's call volume. More recently, 211 is connecting residents to up-to-date information on COVID-19 testing and state-issued guidance.</p>
	<p>In 2020, there were 13 grants totaling \$168,333.43 that</p>	<p>Alzheimer's Association received a \$25,000 grant~ (split between KFH-Roseville, KFH-Sacramento, and KFH-South Sacramento) for its Alzheimer's</p>

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<p>Mental and Behavioral Health</p>	<p>addressed Mental and Behavioral Health in the KFH-South Sacramento service area.</p>	<p>Public Education and Awareness Program, which was designed to increase awareness in minority communities through Alzheimer’s information, education programs, and support. These efforts will help ensure that timely supportive interventions can help alleviate caregiver burden, improve quality of life, delay institutional placement, and lower health care costs. More than 32,000 Sacramento County residents are among the 5 million Americans living with Alzheimer’s and roughly 60,000 more are serving as caregivers to those living with dementia. The burden of dementia disproportionately impacts minorities. Research shows Latinos and Asians are 1.5 times more likely than whites to develop dementia due to health and socioeconomic factors.</p> <hr/> <p>The Anti-Recidivism Coalition (ARC) received a \$50,000 grant~ (split between KFH-Sacramento and KFH-South Sacramento) to support its Sacramento Mental Health Program, which seeks to reduce the stigma of mental health needs among formerly incarcerated individuals. Mental health supports are part of a wraparound strategy that includes a supportive peer community, connections to jobs, educational opportunities, and housing. ARC will offer 3 weekly evidence-based therapy groups, including Seeking Safety and Dialectical Behavioral Therapy, and provide programming inside the Sacramento Jail, youth detention facilities, and women's prison.</p> <hr/> <p>La Familia Counseling Center, Inc. received a \$25,000 grant~ (split between KFH-Sacramento and KFH-South Sacramento) to support its Centro de Apoyo Latino (CAL) /Latino Support Center. This program will focus primarily on Sacramento’s underserved Latinx community, which over the last 4 years has experienced an increased need for mental health services. This need is associated with poverty and the anxiety and fear brought on by law enforcement, immigration policies, and other public stressors. Coupled with this increase is a stigma within the Latinx community regarding mental health services, which can discourage many from reaching out for assistance. This</p>

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		<p>initiative will provide services that are sensitive to the group’s social, cultural, and language needs.</p> <hr/> <p>Saint John’s Program for Real Change received a \$25,000 grant~ (split between KFH-Sacramento and KFH-South Sacramento) for its Psychotropic and Child Development Support for Formerly Homeless Women and Children program. Homeless clients often have co-occurring mental health concerns that left untreated create additional barriers to accessing corrective and supportive services, which can lead to alcohol/drug relapse when individuals self-medicate in their search for symptom relief. Saint John’s partners with Sacramento County ACCESS to administer psychotropic assessments for residents in its women's and children's shelter. Through the C.A.R.E. program, these assessments include parent and child ACE questionnaires, Child Behavioral Checklist (CBCL), Strengths and Difficulties Questionnaire (SDQ), and the Ages and Stages: Social-emotional Questionnaire (ASQ-SE and ASQ-3).</p> <hr/> <p>Youth Forward received a \$50,000 grant~ (split between KFH-Sacramento and KFH-South Sacramento) for its Supporting the Mental Health of Sacramento Black Youth program. Through this effort, Youth Forward will:</p> <ol style="list-style-type: none"> 1. Coordinate a training series on mental health for youth development organizations with a focus on organizations that work with low-income Black youth in South Sacramento 2. Work to shape the policies and practices of local school districts and the Sacramento County Office of Education to better support the social, mental, and emotional health of Black youth 3. Use Kaiser Permanente funding to provide small pass-through grants to local grassroots organizations that mentor and support Black youth <p>The program will build and deepen partnerships with community-based organizations and school and county leaders to improve the environments that impact mental health of Black youth.</p>